



Classic Riders Club of Goulburn Inc

PO Box 415, Goulburn NSW 2580

APPLICATION FOR MEMBERSHIP

Applicant's Name _____

Street Address _____

Town _____ State _____ Postcode _____

Contact Telephone (Home) _____ (Work) _____

(Mobile) _____

Email _____

I **agree / do not agree**, to have my name and phone number on a list available to other members.

Emergency (NOK) Name _____ (Mobile) _____

Signature _____ Date _____

Nominated by _____
(Member's name) (Signature)

Membership renewals are due on 1 August each year

MEMBERSHIP FEES

- **New membership full year** – 1 August to 31 July – includes club badge and the 2nd year of membership for historic registration requirements and insurance – \$30.00 per year plus \$35.00 joining fee = **TOTAL \$65.00**
- **New membership half year** - 1 February to 31 July – \$15.00 plus \$35.00 joining fee = **TOTAL \$50.00**

PAYMENT OPTIONS

- Cheques payable to Classic Riders Club of Goulburn Inc. and posted to – Classic Riders Club of Goulburn Inc. PO Box 415 GOULBURN NSW 2580
- Direct Deposit to - BSB 082-624, Account Number 82185-9955, Name Classic Riders Club of Goulburn General Account

Office Use Only

AMOUNT PAID \$ _____ Receipt Number _____ Issue DATE ____/____/____

Membership Card Issued Membership Badge Issued

(1) Motorcycle _____ Model _____ Year _____
Make
Registration No. _____ Date of Expiry _____

(2) Motorcycle _____ Model _____ Year _____
Make
Registration No. _____ Date of Expiry _____

(3) Motorcycle _____ Model _____ Year _____
Make
Registration No. _____ Date of Expiry _____

(4) Motorcycle _____ Model _____ Year _____
Make
Registration No. _____ Date of Expiry _____

5 Motorcycle _____ Model _____ Year _____
Make
Registration No. _____ Date of Expiry _____

6 Motorcycle _____ Model _____ Year _____
Make
Registration No. _____ Date of Expiry _____